

SCC eFile	2014 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	214510890				
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: Plum Creek Investment Company</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEM 4701 COX ROAD, SUITE 285 GLEN ALLEN, VA</p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: OR</p> </div> <div style="width: 35%;"> <p>DUE DATE: 4/30/2014</p> <p>SCC ID NO: F1507518</p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>10,000</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	COMMON	10,000
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COMMON	10,000					
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="text-align: center;">ADDRESS: 601 UNION STREET, SUITE 3100</p> <p style="text-align: center;">CITY/ST/ZIP: SEATTLE, WA 98101</p>						
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>						
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: THOMAS M. LINDQUIST TITLE: PRESIDENT ADDRESS: 601 UNION STREET, SUITE 3100 CITY/ST/ZIP/CO: SEATTLE, WA 98101 </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 40%; text-align: center; vertical-align: middle;"> OFFICER <input type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: THOMAS M. LINDQUIST TITLE: PRESIDENT ADDRESS: 601 UNION STREET, SUITE 3100 CITY/ST/ZIP/CO: SEATTLE, WA 98101	<input checked="" type="checkbox"/>	OFFICER <input type="checkbox"/> DIRECTOR	
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NAME:	RUSSELL S. HAGEN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	601 UNION STREET, SUITE 3100		
CITY/ST/ZIP/CO:	SEATTLE, WA 98101		
NAME:	JOHN B. HOBBS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	601 UNION STREET, SUITE 3100		
CITY/ST/ZIP/CO:	SEATTLE, WA 98101		
NAME:	ROBERT J. JIRSA	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	601 UNION STREET, SUITE 3100		
CITY/ST/ZIP/CO:	SEATTLE, WA 98101		
NAME:	JAMES A. KILBERG	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	601 UNION STREET, SUITE 3100		
CITY/ST/ZIP/CO:	SEATTLE, WA 98101		
NAME:	PETER C. MADDEN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	601 UNION STREET, SUITE 3100		
CITY/ST/ZIP/CO:	SEATTLE, WA 98101		
NAME:	MARK A. MILLER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	601 UNION STREET, SUITE 3100		
CITY/ST/ZIP/CO:	SEATTLE, WA 98101		
NAME:	LARRY D. NEILSON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	601 UNION STREET, SUITE 3100		
CITY/ST/ZIP/CO:	SEATTLE, WA 98101		
NAME:	ROBERT J. OLSZEWSKI	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	601 UNION STREET, SUITE 3100		
CITY/ST/ZIP/CO:	SEATTLE, WA 98101		
NAME:	THOMAS G. RAY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	601 UNION STREET, SUITE 3100		
CITY/ST/ZIP/CO:	SEATTLE, WA 98101		
NAME:	THOMAS M. REED	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	601 UNION STREET, SUITE 3100		
CITY/ST/ZIP/CO:	SEATTLE, WA 98101		
NAME:	PAUL A. STAMNES	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	601 UNION STREET, SUITE 3100		
CITY/ST/ZIP/CO:	SEATTLE, WA 98101		

NAME:	LAURA B. SMITH	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	601 UNION STREET, SUITE 3100		
CITY/ST/ZIP/CO:	SEATTLE, WA 98101		
NAME:	RICK R. HOLLEY	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CEO		
ADDRESS:	601 UNION STREET, SUITE 3100		
CITY/ST/ZIP/CO:	SEATTLE, WA 98101		
NAME:	JAMES A. KRAFT	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	601 UNION STREET, SUITE 3100		
CITY/ST/ZIP/CO:	SEATTLE, WA 98101		
NAME:	ERWIN D. BARGER, JR.	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	601 UNION STREET, SUITE 3100		
CITY/ST/ZIP/CO:	SEATTLE, WA 98101		
NAME:	ELIZABETH U. FEE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	601 UNION STREET, SUITE 3100		
CITY/ST/ZIP/CO:	SEATTLE, WA 98101		
NAME:	LORIS A. JAKIELSKI	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	601 UNION STREET, SUITE 3100		
CITY/ST/ZIP/CO:	SEATTLE, WA 98101		
NAME:	DAN E. MANNING	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CONTROLLER		
ADDRESS:	601 UNION STREET, SUITE 3100		
CITY/ST/ZIP/CO:	SEATTLE, WA 98101		
NAME:	JOSE J QUINTANA	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	601 UNION STREET, SUITE 3100		
CITY/ST/ZIP/CO:	SEATTLE, WA 98101		
NAME:	ZANNE A. RHYDER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	601 UNION STREET, SUITE 3100		
CITY/ST/ZIP/CO:	SEATTLE, WA 98101		
NAME:	TIMOTHY E. PUNKE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	601 UNION STREET, SUITE 3100		
CITY/ST/ZIP/CO:	SEATTLE, WA 98101		
NAME:	DAVID J. SPRINKLE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	601 UNION STREET, SUITE 3100		
CITY/ST/ZIP/CO:	SEATTLE, WA 98101		

NAME:	ELIZABETH BERGQUIST	<input checked="checked" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	601 UNION STREET, SUITE 3100		
CITY/ST/ZIP/CO:	SEATTLE, WA 98101		
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ ZANNE A. RHYDER	ZANNE A. RHYDER, ASST	2/27/2014	
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	SECRETARY PRINTED NAME AND CORPORATE TITLE	DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			